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NIH Budget Hearings

Some of the most important documents issued by the Federal Government are records of hearings on appropriations. Of special relevance to scientists is a report of the hearings on the National Institutes of Health of a subcommittee headed by Representative John E. Fogarty of Rhode Island. The volume*, consisting of 775 pages, includes detailed budgets, reports of advances in medical research, presentations by top personnel at NIH, and examination of witnesses by Mr. Fogarty and his colleagues.

To the scientist, the materials of substantive interest are the technical presentations. However, the actual hearings had dramatic qualities. Representative Fogarty was the star of the show. With great skill he built a defensible record for medical research, drawing useful testimony from the witnesses. When they hesitated or when the answer seemed likely to be complex he asked them to prepare a statement for the record. A reading of the report of the hearings leaves one impressed with the crucial role of a few people in determining the course of medical research in this country. Subtract Representative Fogarty, Senator Hill, or Doctor Shannon and history would have been different. As to the future, the document provides hints, for it suggests coming events involving Surgeon General Stewart, Secretary Gardner, and President Johnson.

The hearing began with a presentation by Dr. Shannon in which he discussed inborn errors of metabolism. He pointed out that prevention is at present the only feasible "cure" for many serious congenital anomalies and diseases. Therefore, it is important to develop tests for genetically carried deficiencies. One such new technique is a blood test for identifying women who may be carriers of a gene that causes progressive muscular dystrophy. Some 27 other genetically controlled defects of metabolism are now known, many of them giving rise to congenital deformities or mental retardation.

Directors of the various Institutes presented highlights of work under their jurisdiction. One of the urgent problems is rubella (German measles). Following an epidemic in 1964–65, pregnant mothers who had been infected with the disease delivered up to 30,000 infants who either died or were damaged. Sequelae included congenital deformities. As a result of recent work development of a vaccine seems practical.

Several presentations underlined the possible importance of environmental factors in disease. There is a striking difference in the incidence of coronary heart disease in Japanese and Americans. In 1960 the rate for men in Japan aged 45 to 64 was 99.2 versus 611.4 per 100,000 U.S. white males. Another difference between disease rates in the United States and Japan is the occurrence of stomach cancer. The causative agents seem to be toxins produced by molds. In Japan, where molds are used in fermentation, the incidence rate of stomach cancer is high. In tropical Africa, where food contamination by molds is ubiquitous, liver cancer occurs frequently.

Of potential personal interest to most scientists are studies on the risk of heart disease. These show that inadequate physical activity increases the risk and lessens the chance of recovery from heart attack.

The report of the NIH hearings contains material of interest to physicians, scientists, and engineers. Reading the report would reassure many that funds are being invested wisely. A good story is available but it is not being disseminated. In future NIH could find itself in need of a broad base of support. This may not be forthcoming unless better means of informing potential friends are devised.—PHILIP H. ABELSON



^{*} Part 4, "Department of Health, Education, and Welfare, National Institutes of Health," hearings before a subcommittee of the Committee on Appropriations, U.S. House of Representatives (available without charge from Committee on Appropriations, U.S. House of Representatives, Washington, D.C.).